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Substitute for form 1449A/PTO				Complete if Known		
				Application Number	10/653657	
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STATEMENT BY APPLICANT				First Named Inventor	Charles L Clay	
	(Use as many sheets as necessary)			Art Unit		
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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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